2000

CA2
NB
FAM
N56
2000

LEGISLATIVE LIBRARY
BIBLIOTHEQUE DE L'ASSEMBLÉE
LEGISLATIVE

JUL 28 2000

FREDERICTON, N.B.

NO PLACE AT THE TABLE

A Study of the Homelessness in Fredericton

Prepared for and funded by the
Fredericton Regional Office of the
Department of Family and Community Services
Province of New Brunswick

John Coates, PHD
St. Thomas University
Principal Investigator

Denise Neate
Research Assistant

Government Publications Section
Legislative Library
766 King Street
P. O. Box 6000
Fredericton, New Brunswick
E3B 5H1

Table of Contents

1. Introduction and Methodology

2. The Context of Homelessness
   - The Problem of Definition and Measurement
   - The Economics of Homelessness
     - International Law, Human Rights and Homelessness
     - Policy Issues and Homelessness
   - New Brunswick's Response
   - Current Reports and Their Recommendations
   - Information from other NB Cities

3. View From the Outside: Services and Utilization
   - Services Available in Fredericton
   - Utilization of Selected Services
   - Agency Perspectives on Homelessness
   - Information From Street Searches

4. View From the Inside: Views of Homeless People
   - Demographic Information
   - Experiences of Homelessness
   - Home Community
   - Background Characteristics of Homeless People
   - Factors Contributing to Homelessness
   - Suggestions from Homeless People

5. Discussion of Findings
   - Overview
   - Review of Findings
   - Conclusions
   - Potential Actions

CHAPTER 1: Introduction and Methodology

This study was carried out under the auspices of the Regional Office of Human Resource Development - New Brunswick, and the Linkage Committee, a group of Regional Directors in the Fredericton area (Mental Health, Community and Social Services, Solicitor General, Public Health, and Housing). The study was designed as a needs assessment of homelessness in Fredericton, and the results would provide information and offer suggestions for service delivery. The study was carried out during October, November and December, 1999.

The objectives of this study were to:

1. Search out and review literature and research reports on shelter for homeless people with specific attention to cities similar in size to Fredericton;
2. Search out and review studies or reports on housing as these relate to the situation experienced by homeless people in Fredericton and in New Brunswick;.
3. Identify the resources available in Fredericton which provide lodging to homeless people;
4. Seek to provide an accurate assessment of the utilization of these resources;
5. Identify unmet needs (if any) in regards to the 'shelter needs' of homeless people;
6. Prepare a research report summarizing the methodology and the findings.

Objectives 1 and 2 are discussed in Chapter 2 of this report and provide information from other cities in New Brunswick and in Canada. This information is relevant as it provides comparative data and information which can be seen as the context within which homelessness exists, and within which services are provided to homeless people exist. Chapter 3 presents a summary of the services available to homeless people in Fredericton and the utilization of these resources. Chapter 4 summarizes the results of interviews with homeless people in Fredericton. Chapter 5 discusses the findings from this study.

Methodology:

An Advisory Committee, composed of professionals in the Fredericton area who are familiar with or provide services to people who are homeless, was formed to assist the researchers in developing data collection strategies, identifying agencies providing services, and reviewing approaches to gathering information from homeless people. Members of the Advisory Committee were an interested and willing resource and proved to be very helpful in providing suggestions for this study. The committee met four times in the course of the study.

This study employed a survey methodology using a semi-structured interview format. In the first phase, representatives of agencies which provided services to homeless people were interviewed with respect to the nature of the services provided and the utilization of the service. A representative from each agency providing services was interviewed, statistics were requested,

and their professional judgements sought about the needs of homeless people. This information provided an 'overview' of the variety of services available to homeless people in Fredericton. Secondly, homeless people were interviewed in an effort to understand the characteristics of people who are homeless, and to ascertain what needs they may have, and what they think would be helpful for them. As well, a street search took place on six different evenings to assess the number of people who may be without accommodation.

At the beginning of the study a homeless person was understood as a person who 'had no longer term residence or whose address was of a temporary nature.' Temporary referred to accommodation which was normally short term (such as shelter, rooming house, friend) and the person did not have a permanent address. Homelessness is seen as a broader term encompassing the situation within which homeless people live. With this understanding a strategy was put into place to obtain an estimate of the number of people in Fredericton who are homeless. A request to HRD-NB resulted in the study learning that the number of recipients in Fredericton who receive the minimum amount of financial assistance was 102, as well, the addresses of the major apartment buildings and rooming houses which are used by people on very low incomes, was created.

However, reliable informants could not be located as many landlords could not be contacted and some superintendents could not receive approval to speak with us. The few who were contacted appeared most concerned and caring for their tenants but almost all of those contacted reported a very stable tenant population. As a result a sampling frame could not be developed as the number and location of homeless people in Fredericton was not known; a random sampling methodology could not be employed. As the opinion of the Advisory Committee was that the large majority of homeless people in Fredericton use the Emergency Shelter and the Community Kitchen, effort shifted to interview as many 'homeless' people as possible who use the Shelter and who use the Community Kitchen. As a result, for practical purposes, in this study a homeless person was operationally defined as a person who was "literally homeless" - a person who has no accommodation or whose accommodation is normally short term (such as an emergency shelter or hostel).

Limitations:

The study deals with homelessness, not poverty. While strongly related, the focus of this study is on people who are homeless. While many people who live in poverty may border on being homeless since they are but an accident, lost job, separation, or a missed rent payment away from being homeless, poor people are not the focus of this study. The study focused on homelessness in Fredericton, NB, and, while, there are similarities with other cities, generalizations to other communities cannot be made with confidence.

This study does not address the broader issue of adequate, affordable and available housing for families. This was not explored in this study as the focus was on the literally homeless and comprised people who were, or lived as, single persons. Nothing in this study

should be interpreted to mean that adequate housing for low-income couples and families is not required. Further, this study does not address the needs of people who may live in inappropriate housing but who do not come to the attention of the different service agencies.

This study presents an informed overview of the services available to homeless people in Fredericton, and presents a reliable source of information about the needs of homeless people who use the Emergency Shelter and the Community Kitchen. As well, the study presents a reasonably accurate assessment of the number of people in Fredericton who were without accommodation during the period in which the study took place.

CHAPTER 2: The Context of Homelessness

INTRODUCTION

Homelessness and shelter have been cause for public concern and policy for hundreds of years in the Fredericton area. The purpose of this study and report is to provide decision makers with empirical data and an awareness of the policy context surrounding the problem as it currently exists. As well this report will provide a brief review regarding housing and shelter issues in New Brunswick. This report will also draw on the work of the Federation of Canadian Municipalities which has released a policy document in June of this year. As well as reports from Edmonton, Toronto and Ottawa which have recognized the acute and intensifying nature of homelessness and have responded with action plans to address the crisis.

THE PROBLEM OF DEFINITION AND MEASUREMENT OF HOMELESSNESS

A fundamental issue with which one must grapple, is that of defining homelessness. The extent of the problem is very dependent on how homelessness is defined. For example, if homelessness is seen as 'people who do not have a place to stay tonight' the number of people may be quite small. However, if homelessness is seen more as 'a condition in which a person lives' on characterized by frequent moves and great insecurity, the number of people will be much larger.

One of the most cited definitions of homelessness is put forward by the United Nations. The UN defines a person as homeless if they meet one of two criteria:

1. Those who have no homes and who live either outdoors or in emergency shelters or hostels, and
2. People whose homes do not meet UN basic standards. These standards include protection from the elements, access to safe water and sanitation, affordable prices, secure tenure and personal safety, and accessibility to employment, education and health care. (Pathis and Murray, p. 17-18)

The Canadian Mortgage and Housing Corporation (CMHC), after struggling with the definition and measurement issues in a three day workshop of international experts, settled on the literally homeless as the best definition. The literally homeless are people who meet the first criterion in the UN definition. The reasoning for this approach is that, while a broader definition may be preferable, for purposes of operationalization and cost-effectiveness this approach is thought to provide the best representation of the population. (Peressini et al, 1996).

As well, some definitions arise out of value-based/political orientations, and others out of the dominant beliefs held by the public. Definitions which tend to be highly value laden are rooted in the belief of the causes of homelessness and the level of culpability held by the individual for the situation. Two theoretical perspectives are outlined by Lee, Lewis and Jones

(1992):

1. "The dominant ideology of American stratification is based primarily on three values: equality, success and democracy. Adherence to such values produces a straightforward justification for inequality: persons are responsible for their own socioeconomic fate."
2. A second theoretical perspective is referred to as the public arenas perspective. This view holds that a complex interplay of socioeconomic and structural factors are the fundamental causes of homelessness.

Other writers, such as Joel Blau in his 1992 book *The Visible Poor,* indicate the difficulties with defining and measuring the homeless "...the definer's political agenda can be easily used to decrease or increase the size of the population" (Blau, p. 8). Empirical studies now demonstrate that the public believes that homelessness is rooted in the second perspective, in "structural forces and bad luck rather than individualistic factors" (Lee et al, 1992).

In addition to these political and theoretical issues, defining and measuring homelessness is made increasingly complex by the fact that the homeless people are not easy to locate and enumerate for the purposes of public policy. Often action is slowed or stalled by arguments over numbers, however the nature of the problem suggests that a public policy response would simply run the risk of being inadequate rather than a move in the wrong direction. Stated differently, homelessness is a fierce and growing crisis and the likelihood that society will over-respond is nil

This study, using the definitions stated earlier, attempts to capture not just the literally homeless but also the people whose lives are dominated by their homelessness.

THE ECONOMICS OF HOMELESSNESS

It is relatively clear that local and regional decision makers currently work in a housing and fiscal policy milieu which makes it difficult to provide adequate responses to the housing needs of those most dispossessed. Indeed this is not only the case in Fredericton or New Brunswick but is the case across the nation. This milieu has not come about through circumstances beyond our control. It has come about by a new economic policy and fiscal and social policy directions, directions which did not exist in earlier times.

The economic shift from Keynesian "demand management" to Regan-Thatcher's policy of supply management proposed by economists at the University of Chicago, meant a shift from spending to meet the developmental needs of citizens to spending to develop industry and economic infrastructure - the "suppliers" of goods and services. The benefits of developing the economic rather than the human side were to eventually "trickle down" to average people. One of the fundamental difficulties with this approach to economics is that if one is not attached to the labour force there is little or nothing to trickle down. People with disabilities, mental illness, addictions, single parents, abused people and their children, the marginally employed and unemployed, and youth are all at grave risk in this new economy. In Canada, among the greatest

perils is to have inadequate or no shelter. Unfortunately as the new economy takes greater hold, more and more people are transformed into paupers and in some cases criminalized because they are poor. Some examples of this phenomenon include:

- Between 1990 and 1995 the number of households in Canada Paying more than 50 percent of their income on rent increased by 43% (From 583,710 to 833,555 households) (Federation of Canadian Municipalities p.1)

- As of 1996, there were 360,735 dwelling units in Canada in need of major repair. (Federation of Canadian Municipalities p.1)

- Between 2001 and 2010 Canada will require and additional 450,000 rental units to meet projected demand. (Federation of Canadian Municipalities p.1)

- There have been significant increases in emergency shelter usage across Canada. (Federation of Canadian Municipalities p.1)

- Homelessness is directly related to higher rates of premature death, infectious disease, chronic conditions, mental illness, and substance abuse. (Taking Responsibility for Homelessness p.iv)

- Homelessness is directly related to poor nutrition, poor hygiene, and a higher likelihood of experiencing violence or trauma. (Taking Responsibility for Homelessness p.iv)

- Homelessness is directly related to lack of privacy and security, and reduced connections to the wider community. (Taking Responsibility for Homelessness p.iv)

- The fastest growing groups of hostel users [in Toronto] are youth under 18 and families with children. Families accounted for 46 percent of the people using hostels in 1996. (Taking Responsibility for Homelessness p.iv)

- Between 30 and 35 percent of homeless people [in Toronto] suffer from mental illness. The estimates are higher for some population groups; for example, 75 percent of homeless single women suffer from mental illness. (Taking Responsibility for Homelessness p.iv)

- Recent proposals in the city of Ottawa have taken aim at so called "squeegee people" to ban their aggressive panhandling techniques.

Housing for people not attached to the labour force is in short and shrinking supply. Emergency shelters have sprung up all over Canada and serve as minimal housing i.e.. just enough to keep citizens from freezing and starving to death. Homelessness has become such a problem that many municipalities, the Federal Government, and international organizations, have spent considerable resources studying the problem.

International Law, Human Rights and Homelessness

The macro-economic context of homelessness and many other socio-economic problems need to be addressed for the protection of the rule of law and for the human, social and economic benefits which come from investing in people. Lawlessness in Canada is currently not just in the "dog eat dog" streets, fundamental law is flaunted in parliaments all across Canada. Many observers suggest that the current state of homelessness and poverty are violations to human rights. Articles 22 through 26 of the Universal Declaration of Human Rights and Articles 10 to 13 of the International Covenant on Economic, Social and Cultural Rights, all of which bind us to make social and economic provisions to citizens at a level relative to our national wealth.(UN pp.7-15) The adoption of "supply side" economics flies in the face of this legal responsibility. Investments in people through social provisions such as adequate income security, education, health care and housing that reflects the living standards of Canada as a whole will help restore the rule of law in the streets and in the parliaments of Canada.

Policy Issues and Homelessness

There are three major factors that are generally considered in assessing housing problems: affordability, adequacy, and availability. All three factors have been interwoven into various housing policy efforts over the years. The issue of affordability refers to the rental cost of a housing unit relative to a person's income. If a person or family is spending more than one-third of their disposable income, affordability is an issue. Adequacy refers to the state of the housing unit relative to the individual person's needs (disabilities, mental health problems, chronic illness). It also refers to the physical state of the unit in regards to plumbing, electricity, size per number of occupants, state of general repair, and so on. Availability is perhaps more self explanatory, referring to the number of units available relative to the number of consumers in need.

"Taking Responsibility for Homelessness: An Action Plan for Toronto" echoes these concerns in identifying the four major causes of homelessness:

- **Increased poverty**: Both in the incidence and depth of poverty have because of changes in the structure of the labour market and because of public policy changes such as restrictions on Employment Insurance eligibility and cuts to welfare.

- **Lack of affordable housing**: The dwindling supply of low-cost rental units and rooming houses, along with the withdrawal of support by both

the federal and provincial governments for new social housing programs, have made affordable housing much harder to find.

- **Deinstitutionalization and lack of discharge planning**: Many people who suffer from mental illness and addictions are homeless partly as a result of deinstitutionalization without adequate community support programs; in addition, their problems have been exacerbated by the inadequate discharge planning of hospitals and jails.

- **Social factors**: Domestic violence, physical and sexual abuse, and the alienation of individuals from family and friends have increased the incidence of homelessness.

NEW BRUNSWICK'S RESPONSE TO THESE ISSUES

Increased poverty:

Social assistance rates in Canada have historically provided a guarantee of poverty to all who have to rely on them. New Brunswick has the lowest assistance levels of any province in Canada. In some cases the assistance level is more than half of what is generally available in other provinces. The poverty line (1999 estimate) in and around Fredericton for a non-disabled single person is $14,275 and the allotment New Brunswick provides is $3168. This is more than $11,000 below the Statistics Canada poverty line (low income cut-off). In the case of a disabled person the short fall from the poverty line is about $8,000 per year. The structure of Social Assistance in New Brunswick guarantees that large numbers of people do not have access to adequate market housing. (Ross et.al. 1994 & National Council of Welfare, 1999)

Lack of affordable housing:

In the post-depression post-war era New Brunswick had a system of poor houses called "Municipal Homes" which were by and large locally funded emergency shelters. Two national studies on provisions to the poor found that services in New Brunswick were among the worst in Canada. Poor Houses were unsanitary, rat infested and housed everyone from the sick and the alcoholic, to the generally homeless. As part of the post-war reconstruction a Keynesian "demand management" approach to social and economic affairs gave birth to the Marsh and Curtis Reports. The Marsh Report outlined the need for a comprehensive plan for social security for Canada. The Curtis Report dealt with the area of housing and shelter.

The Curtis Report recognized in the early 1940's that "allowing the free play of market forces in the housing field with a minimum of government intervention had resulted in a serious deficiency in housing, particularly for the low income group" (Guest, 1991). The federal government responded with the National Housing Act and The Central Mortgage and Housing Corporation with the aim of constructing tens of thousands of homes for returning soldiers and to work cooperatively with provincial governments to provide adequate, affordable, housing for non-military low income people.

It was not until the 1960's that New Brunswick took advantage of provisions under the NHA and CMHC. Under the Robichaud liberals the Programme of Equal Opportunity transferred responsibility for social services from municipalities and county seats to the province. This change made it possible to work cooperatively with CMHC and the federal government to build low income public housing in New Brunswick.

The transition from the 1960's to the 1970's saw Public Housing under attack as "stigmatizing ghettoes for the poor" by the Task Force on Housing and Urban Development lead by Paul Hellyer.(Guest, 1991) Provisions emerged during the seventies to provide mixed income housing developments through Non-profit and Coop Housing. Some provinces took advantage of the new provisions and built thousands of non-profit and Coop housing developments. Although some housing development took place in New Brunswick the potential of Coop and Non-profit housing has remained largely only potential. This relative inaction has maintained an acute shortage of low income public and non-profit housing and leaves our emergency shelters the only refuge from the elements for many people.

Deinstitutionalization and lack of discharge planning:

New Brunswick like many other provinces has advocated for a change in the care of psychiatric patients, the seriously disabled and hospital patients in general. Institutional care has been all but eliminated in New Brunswick over the past twenty years. The notion that normalization in the community provided a higher quality of life for people was cited as the primary goal. Many social commentators argued that the fundamental emphasis would be on fiscal savings. No formal studies have been carried out in New Brunswick to compare expenditures between the institutional and the community based approach to care. Indications are that ex-psychiatric patients are often using emergency shelters in the absence of adequate, affordable, and available housing in the community, and in place of the formal institutional setting.

It has been documented in Ontario with regard to discharge planning from hospitals that "Community supports to assist people outside the hospitals are not provided at a level commensurate with the need. The result is inadequate housing, social isolation, non-existent care and, in too many cases, reinstitutionalization and/or preventable deaths." (Lightman, 1997)

Release from jails and prisons often present people with the threat of homelessness. Being released to half-way houses is generally followed up with a connection to the John Howard or Elizabeth Frye Societies. These agencies, while providing general supports for ex-inmates, can not provide housing for people, although in the Fredericton area at least, they do assist in securing income assistance and finding employment (SED Program). Ex-inmates often find themselves in grave financial conditions which lead to homelessness. This circumstance not only adds stress to the already limited resources of emergency shelters but also sets up a scenario where the likelihood of recidivism is greatly escalated.

Other factors:

Another issue that demands some attention is the problem of gentrification and commercialization. Gentrification is the upgrading of inner city housing to be used by middle and upper income families or the destruction of older low income housing for new high cost housing.

Houses that formerly were sub-divided into apartments or were used as low cost rooming housing are slowly disappearing in most cities. Similarly many cities (Fredericton is one) low cost rooming houses and apartments are being demolished to make way for business development. And the City Councils have been reluctant to allow low-cost rooming houses to be established. In both situations there are no planned provisions made for the former consumers of that low cost housing.

There is the issue of shelter for the homeless in rural areas.

> "In rural Canada, there are people who are thrown out of their family homes, people whose homes are destroyed by fire, people evicted from rental housing, people who are evicted from their homes or farms by mortgage foreclosure and people who are victims of domestic violence." (McLaughlin 1988 p.33)

In other words homelessness and the need for shelter is experienced by people outside of the city where there are no emergency shelters and little if any formal response to need.

A local study Homeless Youth: Fredericton's Hidden Problem, while not identifying how many homeless youth are in Fredericton, identified the community agencies which service this group. Out of eighteen services, only one agency provided shelter and only one provided income. Six agencies provided food and ten provided individual counseling. Youth between the ages of sixteen and nineteen years old are sorely under-serviced. (Adshade, 1994)

Similarly, the victims of domestic violence are at great risk of being homeless. Single parent women and their children (the general victims of family violence) are among the most vulnerable to poverty in Canada and New Brunswick. Poverty being the most important cause of homelessness creates significant peril for single parents and their children.

Provincial Housing Programs in New Brunswick

New Brunswick currently has six programs which are designed to ease homelessness. However the programs tend to spend very little relative to need and to other provinces. For example in 1988 there were only 67 social housing starts in New Brunswick. By way of contrast Nova Scotia had 213, Newfoundland had 105, and even tiny PEI had more social housing starts than New Brunswick, at 94 (McLaughlin, 1990). The programs that exist in New Brunswick include:

-Assistance with Rental Costs (HRD-NB)

-For seniors (60-64) and disabled persons, based on rent paid relative to income.

-Non-Profit Housing Program

-Subsidizes housing units for households paying more than 30% of their income on housing in the private market.

-Public Housing Program

-Low income families and seniors who have difficulty getting market housing are candidates for this program.

-Property Tax Allowance Program

-Property tax rebate for low income people.

-Residential Rehabilitation Assistance Program & Home Improvement Loans

-Federal and provincial loan system for low income people to make repairs to sub-standard housing.

-Rural and Native Housing/Basic Shelter Programs

-Assist eligible Native and Non-Native households to obtain housing in rural areas. (Family Policy Secretariat, 1995)

The Minister's Task Force on Housing

In 1988, Peter Trites, Minister of Housing appointed a task force on housing in New Brunswick. The task force considered 212 briefs and presentations from the stake holders in the housing field. Seniors, disabled people, social activists and advocates, provincial associations and representatives of various government departments participated in the task force. The task force found a number of clear problems, including:

-There is a shortage of affordable, adequate housing to meet the needs of New Brunswickers. p.10.

-Government's response to housing needs has been insufficient and poorly focused. p.25.

-Current programs have major flaws and are reactive, responding to crises rather than causes. (This problem identification area deals with working poor, single persons, deinstitutionalized persons, youth, victims of family violence, and transient "street people".) p.46.

-Opportunities to make economic and social gains in policy and programs are frequently lost or wasted. p.70.

-Lack of consultation with consumers and other stake holders creates problems in program development and delivery. p.76.

-The roles of various sectors involved in the provision of housing are not well defined. p.82

-There is little recognition on the part of government of the importance of the prevention of problems. p.87.

The task force recommended the adoption of a number of guiding Principles and Strategic Statements. However, despite these recommendations in the 1988 report, the reality of homelessness in New Brunswick has not improved.

Principles and Strategic Statements

Principle 1: p.89.

Adequate and affordable shelter is a basic need like food, water and clothing, which must be met before human development can proceed to its full potential.

Strategic Statement 1:

That the government of New Brunswick direct sufficient human and financial resources to the achievement of adequate and affordable housing as a basic requirement for full development of the economic and human potential of this

province.

Principle 2: p.97.

Housing is more than shelter; it is a total environment which promotes human development.

Strategic Statement 2:

That government policies and programs focus on people, with an integrated approach to the development of human resources, requiring a high degree of coordination between government departments.

Principle 3: p.100.

The attainment of financial and social independence through personal responsibility, in which housing plays a critical role, is a major motivator for human achievement.

Strategic Statement 3:

That government housing policy and programs promote independent living, both social and economic, through incentives and recognition for personal responsibility, growth and success.

Principle 4: p.108.

Housing is an appropriate and effective tool for social and economic development.

Strategic Statement 4:

That the potential of housing as a tool for economic and social development be recognized and utilized, both to create jobs and to enhance the quality of life.

Principle 5: p.113.

Effective programs that respond to people's real needs can best be developed in consultation with the people involved and others with an interest in satisfying those needs.

Strategic Statement 5:

That programs be developed and delivered at the community level so as to assure their necessary flexibility and full participation of all sectors in consultation and action, as well as program credibility and acceptance in delivery.

Principle 6: p.118.

The government cannot be expected to be the primary provider of services, to meet all human needs responsibility must be shared.

Strategic Statement 6:

That government policy be based on the concept of shared responsibility, so the role of government becomes more frequently that of facilitation than of provision, recognizing the primary responsibility of government in the protection of rights and the contribution of funding.

Principle 7: p.122.

Prevention of problems reinforces positive values and reduces the cost of physical and social rehabilitation.

Strategic Statement 7:

That government policy give at least equal importance to the long-term

prevention of social and economic problems as to short-term remedies for specific situations.

CURRENT REPORTS AND RECOMMENDATIONS

Toronto:

The Toronto Report covered six major areas that needed to be addressed in order to keep up with the growing homelessness crisis.

Simplifying and Coordinating the Service System

This involves appointing a Facilitator for Action on Homelessness to implement the recommendations of the Task Force and to establish a 24-hour Homeless Services Information System to link all agencies to a housing database. The Facilitator would be responsible for redirecting resources from hostel spaces to permanent housing .

Specific Strategies for High Risk Groups

Housing for abused women and their children with special safety features should be evenly distributed throughout the city/region. Family hostels should be developed. The federal government should provide funding for housing and supports to the Aboriginal homeless population in partnership with the provincial government.

Prevention Strategies

The shelter component maximum for social assistance should equal 85 percent of the median market rent based on annual market surveys. In Toronto this would equal about a 20 percent increase on the current maximum shelter benefit. A new shelter allowance program should be created to target working poor families, and working adults in order to reduce the risk of homelessness on the transfer from assistance to work. The program should reduce the share of income the low-income people spend on housing to 35 to 40 percent of income.

A Comprehensive Health Strategy for Homeless People

The Ministry of Health should combine its current community mental health and community health funding for homeless people in a single Homelessness Health Fund. The goals include making health cards more easily available to homeless people , prescription drugs should be made available free of charge, Housed services and outreach should be established to focus on harm-reduction and linkages to other social and health services.

Supportive Housing

The Toronto Task Force is calling for 5000 additional supportive housing units over the next five years. It recommends that similar steps be taken outside of Metro Toronto as well. This supportive housing is to be designed to service persons with mental illness, severe physical disabilities and those deemed "hard to house" homeless people.

Affordable Housing

The city should develop a "housing first" policy for municipal lands to be used to construct affordable housing. The tax rate for this housing should be adjusted to that for single family dwellings. The City and its agencies should waive fees associated with construction hook-ups, parks levies in order to facilitate affordability. CMHC should provide direct mortgage loans for new affordable rental projects. Federal and provincial governments should make suitable public lands available for affordable housing as well as rebate GST and PST to the developers or builders of affordable housing. All levels of government should collaborate to provide the capital needed to build new affordable housing. Some of this housing should include Single Room Occupancy (SRO) for homeless singles. Funds for low income housing should be secured in exchange for increases in height and density requirements currently placed on construction.

Ottawa-Carleton:

The Ottawa Carleton report focused on the same issues and tasks as the Toronto report. The report divides tasks among the three levels of government This report holds that the regional government take responsibility to coordinate and integrate the services related to homelessness in the Ottawa-Carleton Regional Municipality. The Report calls on the Federal and provincial governments to provide all citizens with the basic right to safe affordable housing. As well the Region recommends that the need for shelter services be decreased for immigrants and refugees. In addition to the division of responsibilities the report makes recommendations in three major areas: Housing Supply and Support, Enable Access to Housing, and Provision of Support Services.

Housing Supply and Support

The primary responsibility for funding affordable housing should be the federal and provincial governments. This includes increasing RRAP funding to upgrade existing housing stock including existing social housing. The region, like Toronto, requests that the Province reassume 100 percent of the costs of supportive housing: capital costs, rent supplements and support services. Ottawa-Carleton also recommends working with the private sector to develop suitable plans for low-income housing. The Region recommends the use of publicly-owned land and regulatory measures as ways to promote the development of affordable housing.

Enable Access To Housing

Like Toronto the need for more housing was followed by concern for the cost of available housing. The Region of Ottawa-Carleton requested that the province increase the amount of shelter allowance to reflect actual

housing costs. It also requested that Trusteeship Agreements for direct payment of rents for people who cannot manage their own finances. As well Ottawa-Carleton recommends that low income persons be provided with a letter of last month's rent guarantee. Provision of the last month's rent at the beginning of a rental agreement is an expense that is virtually impossible for those on social assistance.

Provision of Support Services

The Region of Ottawa-Carleton requested that up to 15% of emergency hostel funding be re-directed toward innovative prevention programs with the goal of reduced use of emergency hostels. It also requested that a Rent Bank be established to provide one-time assistance for rent arrears to people on low fixed monthly income, and requested that the province restore cost sharing for day programs to 1995 levels, as these would help maintain people in permanent accommodation. As well, Ottawa-Carleton recommends that funding be provided to increase the community's capacity to provide convalescent, palliative and long term care, and a full range of addictions services as these are seen to reduce the risk of people becoming homeless. The Region also requested that a coordinated approach to service delivery be reviewed and established in an effort to improve service delivery to those who are homeless or are at risk of becoming homeless.

Federation of Canadian Municipalities

The last report that will be reviewed was prepared by the Federation of Canadian Municipalities. Many of the recommendations are similar to those of the Toronto and Ottawa-Carleton documents. They call for Intergovernmental cooperation with the federal government taking the lead role, new and renovated affordable housing for the general population with attention to people with special needs, and finally rent supplement increases to aid accessibility.

Roles of Government:

Municipal

Municipal governments should play a role in making land available and facilitating zoning and regulations which can impede the creation of affordable housing. As well, municipal governments can supply hard infrastructure such as roads, transit, park space, water and sewage. Local taxation rates can be adjusted in order to facilitate affordability. Finally, some municipalities have housing companies that develop and operate subsidized housing.

Provincial

Provincial governments establish the framework for municipal roles in housing. Provinces have constitutional responsibility for property and civil rights and for municipal matters including social policies related to

homelessness. With the devolution agreements signed with the majority of provinces and the moneys that are attached there is some danger that affordable housing may not evolve as quickly as would be preferable. Provinces must act proactively in setting the framework for municipalities and in urging the federal government to provide the money required to deal with the housing crisis.

Federal

The Federation of Canadian Municipalities is calling for a national housing strategy where the federal government compliments and supports the other orders of government. The rationale for a stronger federal role in a time of devolution involves various priorities set by Ottawa. Health, social well-being and child poverty are explicit priorities for the federal government, along with debt reduction, these are some of the major targets for the federal fiscal surplus. Homelessness and inadequate housing is a major determinant of poor health status. In short insuring affordable housing is key to dealing with these issues.

CONCLUSION

To conclude this chapter, one may note that in the sixties and early seventies, before the shift to supply side economics, the issue of homelessness was addressed by creating housing and supplementing income. There was an unwritten belief and effort by all levels of government toward the goal of providing housing for everyone - providing a social minimum. In the political climate of the recent decade governments have substantially reduced their support for affordable, available and adequate housing as they appear to have shifted to the relief of destitution. Many studies, such as those referred to in this chapter, present arguments in support of the need for our society to provide not only shelter and food, but to provide the opportunity for all people to have adequate housing. Recommendations included the need for coordination among service providers, cooperation among different levels of government, prevention and making available supportive and affordable housing.

"For homeless families, a recent U.S. study found that obtaining affordable housing was the main predictor of success, regardless of the other problems a family may have."

> "A consensus has emerged among social scientists and commentators that homelessness results not from individual choice or individual failure, but rather from social structural factors - *primarily poverty and the shortage of decent and affordable housing*." emphasis added (Begin, 1990)

In 1996 in New Brunswick, 21,000 households were in core need. This represents 30.6 percent of all households in the province. In the face of such need the time to act is now (Federation of Canadian Municipalities, 1999).

INFORMATION FROM OTHER NB CITIES

SAINT JOHN:

Booth Centre: contact person Dave Hood

- Provides emergency, short-term, longer-term accommodation and has a separate 'special care' section.
- Has 40 beds (more if needed) in shared and single rooms, and 24 'special care' beds which has separate staffing.
- Many longer term residents are those who have been 'de-institutionalized' and do not fit criteria for 'special care' (comments by another community person).
- Provides meals, laundry and monitors medication.
- Variable rate charge depending on income; both per diem and monthly.

Occupancy:

- Full most nights, and extra beds are set up as needed.
- provides service only to men
- Population served is increasingly becoming younger and at present, the average age is estimated to be between 25 and 30 years.
- Residents were identified as being in one of three groups - one-time, more focused individuals, repeaters and long-term.

Hestia House: Emergency shelter for women fleeing an abusive relationship.

City Police: Frequently put-up those who are too intoxicated to be admitted to the Booth Centre.

YM-YWCA: Makes rooms available to women who are referred from a social agency.

Romero House: contact Carol McNulty

- Provides meals (Community Kitchen)
- Has plans to establish a mobile which will take food to homeless people.
- Reports that there are 15-18 people each month (mostly men) who are without a place to stay in Saint John.
- Reports that there are far fewer women as they "go underground" or "take up with men."
- Recipients appear to be getting younger.

Coverdale Centre: A service for women being discharged from prison. Referred 14 women to the Y in the six months prior to November, 1999.

re: Women: The Salvation Army ran a home for women but this closed several years ago as there were too few women (2-3 a month) to make it economically viable.

MONCTON:

House of Nazareth: contact person: Annette Bastarache

- House of Nazareth has several services including a clothing bank, furniture store, an emergency shelter for men and a short-term residence for women and children.

Men's Shelter

- Shelter for men accommodates up to 30 people and averages about 15 per night.
- Estimates that they served 1,000 homeless people in 1998 (10% are women).
- Men are helped to find longer term accommodation in the city.
- There is no cost.

Women's Shelter

- The women's residence can house up to 7 women and children.
- Women usually stay for a week or two.
- Some women are transients, many have serious mental health concerns.
- Reports that women are more resourceful than men.

Summary:

In both Saint John and Moncton, as in Fredericton, there are 'transition' homes for abused women and a community kitchen. However, the resources available to respond to homelessness differ. In Moncton, long term accommodation is not available at their shelter and men and women are assisted to find longer term shelter. In Saint John, the Booth center provides both short term and long term accommodation for men only, and there is no emergency shelter for women. There is some concern that there is still an unmet need in regards to emergency shelter for men. In emergencies, women are put-up, on referral, at the 'Y'.

In these communities, as in Fredericton, the large majority of homeless people served are men. Women are reported to be more resourceful, and many of the women served have mental health concerns. However, respondents could only speculate on why women are so vastly under-represented.

Chapter 3: View from the Outside: Services and Utilization

SERVICES AVAILABLE TO HOMELESS PEOPLE IN FREDERICTON

In an effort to obtain an indication of the services available to homeless people in Fredericton, with the assistance of the advisory committee, a list of relevant agencies was developed, and efforts were made to interview a representative from each agency. As part of this interview process representatives were asked to share any statistics which may be available regarding the use of their services. The following agencies / organizations were identified:

Community Kitchen	Emergency Shelter
Salvation Army	Youth in Transition
Transition House	John Howard Society
Food Bank	Fredericton Police Dept.
Child Find	Probation
HRD-NB	Mental Health Clinic
Public Health	DECH
Addiction Service - Outpatient	Addiction Services - Detox

Overall, with but few exceptions, the agencies were very willing to provide the desired information. Representatives with whom we spoke were very committed to providing assistance and spoke compassionately about the people whom they served. Efforts to involve Liberty Lane were not successful, and the Native Friendship Centre declined to participate. Gignoo House declined to be interviewed but stated that they serve primarily Native clients and when they do provide a service it is almost always at the request of the Emergency Shelter when the Shelter has reached its capacity. Gignoo House suggested that we could find out the information we requested from the staff at the Emergency Shelter. In the course of this study we also learned that Gignoo House received occasional referrals from Transition House and Youth in Transition. While not listed, efforts were made early in the study to contact private rooming houses / apartments which were known to provide accommodation to many low income people. Contact was initiated in a response to get a clearer picture of the extent of homelessness. However, for several of the apartments it was very difficult to get in touch with a spokesperson. For those owners / superintendents with whom contact was made, most expressed great concern for the well-being of their tenants, and reported that their tenants had lived in their units longer than six months (which did not meet the definition of homelessness used in this study).

It is important to note that both Fredericton High Schools were contacted and reported dealing with 3 students, in total, who were struggling with homelessness. One of these attended Child Find, one returned to his grandparent, and the other student was not interviewed on the advice of the school personnel.

Table 1 provides a summary of the various services provided to homeless people in the Fredericton area. It is important to note that Table 1 lists only the primary services offered to homeless people. Many, if not all, of the agencies surveyed frequently provide assistance beyond their mandate. For example, staff at some of the agencies have made collections (of money, clothing, food, etc.) among employees to assist people in need. Many agencies 'reach out' beyond their mandate when confronted with people in particularly difficult situations. For example, the Fredericton Police Department, make available empty cells to transients when the Shelter is full, and to people 'under the influence.'

TABLE 1: SERVICES PROVIDED TO HOMELESS PEOPLE

Agency / Service Provided	Assessment	Counselling	Training / Education	LT Financial Assistance	ST Financial Assistance	Medical Assistance	Medical Coverage	Shelter	Meals	Food	Clothing	Furniture	Referral	Transportation	Incidentals (hygiene items, vouchers)
HRD-NB	●		●	●	●		●	●		●	●	●		●	
Family & Community Services	●	●													
Regional Addictions	●	●													
Mental Health	●	●													
F'ton Police Dept.								●							
Child Find	●	●	●						●				●	●	●
Emergency Shelter								●	●		●				
Community Kitchen									●	●					
DECH						●									
Salvation Army		●									●			●	
John Howard		●	●												
Probation		●											●		
Food Bank			●							●		●			
Local Churches														●	
Youth in Transition		●	●					●	●		●		●		
Transition House		●						●	●		●		●		

UTILIZATION OF SELECTED SERVICES:

The following summaries are taken from the records submitted by the agencies. Interested readers are encouraged to contact the principal investigator if they wish to review the information provided by the agencies.

CHILD FIND NB

Child Find is one of the primary service agencies in Fredericton which primarily serves youth in the 16-19 age range and but in certain circumstances will be involved with youth in the 13-24 age range. In addition to providing an evening meal, shower facilities and small items such as personal hygiene items, Child Find will attempt to address any legitimate need a youth may present excluding shelter. As such they provide counselling and referral, and will provide travel to reunite a child with his/her family.

Number of youth served

a:

Year	Served Annually	Monthly Average	Average # New Clients (monthly)
1996	652	54	9
1997	588	49	6
1998	493	41	9
1999	324	33	8 (Jan-Oct)

95 % of Child Find's services are provided to males.
Many first-time female clients "do not stay on streets." Many return home, some exchange sex for accommodation and may become involved in the sex trade.

Keith Ross
Executive Director

b: For the period November, 1998 - October, 1999

	Total	New	Monthly Avg.
Male:	239	62	5
Female:	147	40	3

YOUTH IN TRANSITION (Chrysalis Home)

Chrysalis Home is a residence program for girls 16-19 years of age. Their goal is to prepare residents for a positive future by assisting them to gain personal esteem and life skills. Residents must attend school and follow house rules, and undergo a home assessment by HRD-NB and Health and Community Services. All residents have the opportunity to benefit from a variety of services provided by staff and volunteers (such as crisis support, tutoring, money management and recreation). Chrysalis Home has 8 beds but normally holds up to 6 long-term youth.

For period October, 1998 - October, 1999

Accepted	Declined	Referral / Elsewhere
11	8	3 - Referred 7 - went elsewhere

During this period Youth in Transition received several self-referrals, referrals from families and requests from other agencies. All referrals concern female youth 16-19 year of age. It is not known where those who were refused admission went, but many would have remained with their families. Many young women choose not to live at Chrysalis Home as they wish more freedom than the 'house rules' will accept.

WOMEN IN TRANSITION: (Transition House)

Women in Transition provides emergency shelter for women (age 19+), and their children, who are fleeing abusive relationships. In certain situations women aged 16-18 are accepted. In addition to providing residents with shelter, meals, clothing and referral, supportive and peer counselling is provided. Transition House also provides a 24 hour crisis line where women in crisis can receive practical advice and support. Transition House is licenced for 19 people and women can stay for thirty days. The occupancy rate varies but for the first 9 months of 1999 the monthly occupancy averaged 11 women.

Crisis calls re: shelter

a:	Year	Annually	Monthly Average
	96-97	331	27
	97-98	351	32
	98-99	395	33
	99-00	212	35 (April-Sept.)

B: Requests for shelter refused:

96-97	80	7
97-98	69	6
98-99	103	9
99-00	62	5 (April-Sept.)

The large majority of these refusals are from women, some with children, who request shelter but who do not fit the criteria (i.e., being in an abusive relationship) for admittance to Transition House. Many of these women who are turned away are without accommodation.

FREDERICTON POLICE DEPARTMENT

The Fredericton Police Department will provide cells in which people can spend a night when there is no other place for them to stay. Frequently many of these people are intoxicated and are released when they are 'sober'. Because of internal policies the number accommodated has declined in recent years.

a:

Year	Annually	Monthly Average
1996	338	28
1997	282	24
1998	140	12
1999	96	10

b: Number of men and women served.

	Men	Women
1996	318	20
1997	261	21
1998	127	13
1999	88	8

FREDERICTON COMMUNITY KITCHEN

The Community Kitchen provides a hot, noon-hour meal every day of the year for anyone who wishes to eat. In addition, the Kitchen also provides sandwiches and snacks to the Emergency Shelter and gives out snacks and provides a few cans of soup. While the number of meals served varies in the course of the month, 85 meals were served on an average day in 1999. The Kitchen reports that the majority of people served are under age 30, that the majority of people served are male (about 5 females a day are served), and that about 95% of the people served are in need of food.

In the Fall of 1999, with funding from HRD-NB, the Community Kitchen employed an outreach worker to assist people who use the Shelter and Community Kitchen in efforts to secure employment and apartments. As this service is in its infancy it is too soon to evaluate its impact.

Meals Served:

1996	29,576	81	
1997	30,526	84	
1998	33,262	96	
1999	23,176	85	(Jan. - Sept.)

FREDERICTON EMERGENCY SHELTER

The 'Shelter' provides a bed along with meals, clothes, showers, and laundry facilities for people who do not have a place to stay. Should the need arise Shelter staff also provide an opportunity for people to talk about concerns and referrals are made when appropriate. The Shelter works closely with other services for people who are homeless. The Shelter can accommodate 30 men and 4 women, while it often accommodates a few more when the need arises. The Shelter reports that it deals with 65-70 different people each month.

Individuals can stay free up to 30 days, after which they must begin to pay rent on a sliding scale. Residents are free to come and go from the Shelter but must be present each evening, or have contacted the staff by 10.30 pm, or else their bed will be given to someone else. At the time of this study the Shelter had 15 people who had lived there longer than 4 months.

a: Number of 'bed-nights' served.

Year	Annually	Daily Average	
1996	8,000	22	
1997	10,000	27	
1998	10,000	27	
1999		30	(Sept.-Nov.)

The Fredericton Emergency Shelter provided 10,000 nights of accommodation in each of 1998 and 1997.

b: Number of different men and women accommodated.

	Annually	Men	Women	Monthly Avg.
1996	434	344	58	34 / 5
1997	471	407	56	34 / 5
1998	446	371	58	29 / 5
1999				

c: Recent daily averages by month (1999)

	Slept at Shelter		Stayed Out That Night
	Men	Women	
Sept.	25	4	3
Oct.	27	4	3
Nov.	24.5	4.5	3

In September, October and December, 1999, the Shelter was at or above capacity on 21 nights.

d: Statistics regarding people turned away when Shelter is full:

Oct. 29 - RCMP contacted Shelter as an elderly male required accommodation. Referred to AHESS as Gignoo House only serves women.

Nov. 7- 2 male and 2 female youth, after several phone calls, were put up in a mote by the AHESS.

Nov. 7- Referred a male to the HRD duty worker.

Nov. 18- 3 'young ladies' arrived at 11.50 pm. HRD and Police were contacted. Fredericton City Police detained the 3 girls (aged 12-14) for the Oromocto RCMP.

Nov. - A male with a serious medical condition was referred by DECH but refused due to extent of care required. Referred to adult protection.

Dec. 2 - A woman was turned away due to lack of space.

Dec. 7 - A woman in receipt of income assistance was, along with her mother, visiting an aunt who was very ill. Suggested she call back each day to check if there is room.

Dec. 7 - Woman coming from Ontario wanted accommodation. She is staying in a motel.

Jan. 19 - Woman and child referred to HRD-NB.

In this very brief period, 4 men and 5 women were turned away for lack of space. The woman with a child, the 3 'young ladies,' and the man with serious health concerns were quite properly referred elsewhere.

It is relevant to point out that of the 15 'guests' who had stayed at the shelter longer than four months, 10 were known to the local mental health clinic.

FREDERICTON FOOD BANK

The Food Bank provides a 3-supply of food, once a month to families in need. In addition to this service the Food Bank also provides clothing and furniture, operates a literacy program and offers cooking and stop-smoking courses. It is a major player in the Christmas Hamper and Christmas Toy activities. People who use the Food Bank must be approved through a means test. The Food Bank in 1998 served over 3,702 different adults and children. About 30% of the people served were under 12 years of age. The Food Bank has almost no clients from the Shelter.

	Hampers Distributed	People Benefitting
1996	8,537	20,488
1997	7,257	18,313
1998	7,264	18,258
1999		
Monthly Avg.	640	1,585
Weekly Avg.	160	396

In 1998, the Food Bank provided 164,322 meals to 18,258 people.

In 1998, 3,702 people benefitted from the Fredericton Food Bank.

AGENCY PERSPECTIVES ON HOMELESSNESS

In addition to questions about the services provided each representative was asked three questions:

1. **Based on your experience, what do you think are the more critical issues experienced by homeless people who use or attempt to use your service?**

2. **What needs of homeless people are not being met in our community?**

3. **What changes or additions to services would significantly improve services to homeless people in Fredericton?**

The agencies interviewed included:

Community Kitchen	**Emergency Shelter**
Salvation Army	**Youth in Transition**
Transition House	**Food Bank**
Fredericton Police Dept.	**DECH**
Child Find	**Probation**
Local Churches	**Mental Health Clinic**
Mental Health Clinic	**Addiction Services**
John Howard Society	**HRD-NB**
Addiction Services - Detox	

In the process of the semi-structured interview format many of the responses overlapped different questions. For example, a need identified by one representative may be presented as a problem by another. In an effort to present a concise summary of the information presented the researcher consolidated responses into two areas: problems and unmet needs, and changes to services. Consolidated refers here to the researcher taking the liberty to shift information to another area when appropriate (for example, something identified by one representative as a need may be shifted to a problem if several other representatives have listed the same item as a problem).

Critical problems and unmet needs confronting homeless people:

1. Lack of shelter for Women: Twelve of sixteen agencies noted that there was a need for a shelter for homeless women. One of these representatives referred to this as the need for more beds for women (referring to the Shelter). The reasons for a separate shelter included comments regarding the need for safety, and that most women are 'homeless' for only a few days as they are forced to 'team up' with a man in order to have accommodation. Another noted the importance of separate accommodation to provide a respite which may assist some women in their

struggle to overcome the effects of having survived an abusive relationship. Another stated that many young women are led into relationships with 'criminal types.'

2. Lack of affordable, low cost housing: Ten of the agencies identified this as a major concern. This concern also reappears in other problem areas and in recommendations regarding specific populations such as women, youth and alcoholics, but it is by far the most frequently occurring problem reported. One agency noted how difficult it is to "show up for work, be polite, be clean and be sharp" when you have been wandering the street all night. The lack of adequate housing also influences other services as, for example, the hospital frequently deals with homeless individuals whose homelessness exacerbates chronic health problems such as diabetes, while others seek medical assistance in the hope of a meal or an overnight bed.

While this study focused on the 'literally homeless' a number of service providers suspect that a large number of people with low incomes and those with dual addictions live in inappropriate housing.

3. Service Gap for those 16-19 years old: Six of the agencies identified this 'service gap' as a critical concern. This was expressed both directly, and in reference to needed services for this age group. Issues included the fact that those 16-19 years old are not eligible for many services. For example, if a parent is willing to have a child back home, they may not be eligible for financial assistance and housing.

The lack of appropriate housing for this age group was also pointed out. References were made to the need for separate accommodation for both men and women. One representative noted the need for a safe and secure place before a person can meet their potential; one stated that sending youth to the shelter frequently leads to more serious, longer term problems; another stated that young women often fall into drug abuse or prostitution when they have no place to stay. Yet another representative stated that women in this age group sometimes feel they are pushed to become pregnant in order to qualify for assistance. The need for a half-way house or second stage housing for young people leaving a treatment program was put forward.

4. Poor access to services: Six representatives identified difficulty with accessing services, including financial assistance. Many young adults and people who are not familiar with 'the system' frequently do not know how to access assistance. Up to date lists of existing services are not readily available. As well, access to financial assistance can, at times, be particularly troublesome. For example, two representatives noted difficulties getting proper identification cards, needed to secure assistance, when that person does not have the money to obtain the cards. Another example is the necessity of repeating the entire application procedure when reapplying for assistance. A case example presented concerned a person who left assistance for employment, but when the employment ended a few months later the person was required to reapply. Problematic waiting was also reported when people are in-between EI and

HRD-NB.

A difficulty regarding access to services was reported to be the frequent wait for service following an assessment at a mental health clinic. This was identified as particularly problematic when a person has decided to seek assistance and is motivated to attempt to deal with issues, and then to be required to wait - sometimes for several months - to receive service. Sometimes, under these circumstances, individuals make poor choices which exacerbate existing problems. Waiting for service from addictions services was also reported.

5. Lack of employable skills: Three agencies identified this concern which was reflected in comments regarding a person's lack of communication and social skills, low level of education, and lack of social competence. While frequently mentioned by agencies providing services to youth, this concern can also be extended to older adults.

6. Lack of communication between agencies and between government departments: Four agency representatives raised this issue and it appears more significant as many departments and agencies work with the same client group: for example, addiction services, financial assistance and mental health. The hassle of re-applying when a person relocates was noted (a suggestion was the development of an intra-provincial identification card and application process). One of the three agencies identified the need to avoid fragmentation and competition among services.

7. Social stigmatization: One representative identified that people in Fredericton are generous and charitable toward the poor. However, while people donate money and time, there is also a desire that the poor be 'out of sight.' The reluctance to licence boarding homes is an example of what some perceive as a pervasive attitude among the population at large.

Recommendations regarding Services for Homeless People:

1. Increased Financial Assistance: Seven representatives drew specific attention to the inadequacy of financial assistance. The low rate of assistance for single individuals is so minimal that it virtually guarantees impoverishment. The lack of financial resources can be seen to be at the root of many of the problems listed. Three of these representatives recommended that, for a limited period of time upon leaving a training program or a treatment program (such as Chrysalis Home, Transition House or an addictions treatment program), an individual would be given a higher rate of assistance to help them get re-established. Three of the

representatives called outright for increased government involvement in regards to financial support.

Related to the need for greater financial assistance is a suggestion which would be a limited cost to government but a great benefit to recipients - abolish the economic unit rule. One of the representatives argued strongly that such a change would provide opportunity for recipients to share accommodation costs. This would save recipients money and also provide greater opportunity for appropriate supportive social networks to develop.

2. Semi-structured accommodation: Five representatives identified the need for a "mildly supervised shelter" or "semi-structured care." This refers to the need of many homeless people, some with mental health concerns, for a home which provides some structure in the form of taking medications, assistance with finances, and housekeeping, while leaving residents substantially free to come and go as they please. In many respects the success of the Emergency Shelter in caring for many of its residents comes from its ability to provide both a limited structure and security balanced with a freedom of movement for residents.

3. Long term counselling: Four representatives identified that many homeless people suffer from unresolved psychological issues and may benefit from longer term counselling and treatment. Such a compassionate approach could be seen to provide a valuable, long term service to many people

4. Half-way housing: Provide the opportunity for people to be gradually integrated back into the community when returning from a treatment program. Such a home could work closely with HRD-NB and other training and counselling services.

5. Unrestricted Residence: Two representatives identified the need for a place where people could stay as long as they were not a threat to other people. Such a facility is seen to provide a safe haven for the severely addicted who risk harming themselves if they sleep outdoors. One representative noted the need for a shelter for people who were prone to violence.

6. Greater outreach to youth and adults: A representative made reference to the need for a 'harm reduction' model of intervention which focuses attention on minimizing the harm which may result from such things as homelessness. The fact that homeless youth are frequently targeted by drug pushers was provided in support. This perspective was reinforced by two other representatives who argued for the need for greater outreach in the form of taking services to people in need, especially youth who may be reluctant to avail themselves of existing services. The importance of taking services to people in need rather than expecting them to come to the service providers was raised. One of the realities of increasing centralization is that

additional travel is required. One of the arguments for increased outreach was to invest money in service delivery now, in order that considerably larger expenditures can be avoided later. While on a slightly different point, the need for a holistic perspective was presented by two representatives in an effort to provide a more effective service now and save on more expensive services later.

6. Access to Medical Card. Three representatives made reference to problems concerning the lack of a medical card. These people identified problems which occur as people lose their 'medical card' when they begin employment. One of these representatives added problems created when certain items required by people with chronic health problems, such as testing strips and syringes essential for diabetics, are not covered.

7. The following service changes were recommended by one or two representatives:

a. Trusteeship to assist with managing financial spending.
b. Transportation assistance for poor people who do not live in the centre of the city and who are severely limited in their ability to access resources such as the Community Kitchen and the Food Bank.
c. Apartments for widowed older women who require assistance when spouses die.
d. Services for women who seek refuge from an abusive relationship after the children are grown and leave home.
e. Educational and employment opportunities which can prevent homelessness.
f. Attention to spirituality in counselling.
g. Provide greater health care, perhaps by providing a doctor to serve homeless people.
h. The Emergency Shelter can benefit from a secure recreational area.
i. Custody, access to children and legal aid are severe problems for homeless people.
j. Services for women with children who leave abusive relationships.
k. More addiction treatment programs especially for women.

INFORMATION FROM STREET SEARCHES:

In an effort to gain a count of the number of people who may be without accommodation plans were put in place to carry out a search of the streets on six different occasions. The cooperation and assistance of people familiar with homelessness and 'street people' volunteered on different nights to accompany the Research Assistant on a search of the streets, jail, bridges and other places where homeless people are known to stay. Volunteers included an experienced police officer, a long term probation officer and a member of the Salvation Army. The searches took place between approximately 11pm and 1am, and took place at the end and beginning of a month, and on different days of the week, Tuesday - Wednesday, Thursday- Friday, and Friday, Sunday.

Time 1: October 26, 1999 October 27, 1999

	Men	Women		Men	Women
Confirmed	8	-	Confirmed	9	1
Reported	2	-	Reported	2	-

The two individuals 'reported' on each night were said to be "sleeping upriver" but no other person was able to confirm this. All but 2 of the 'confirmed' men could be identified and each had accommodation if he was in a condition (i.e., sober) to take advantage of it. The single woman was refused admission at Transition House and was put up for the night in a hotel by the AHESS.

Time 2: November 4, 1999 November 5, 1999

	Men	Women		Men	Women
Confirmed	5	-	Confirmed	5	-
Reported	1	-	Reported	4	-

On November 4, 4 of the 5 'confirmed' people were the same as reported on October 26 and 27. The two 'new' people involved a man who was asking for bus money to return to his home in Ottawa, and a man reportedly sleeping under the bridge (blanket found but person not seen).

On November 5, the 5 confirmed people were the same people as reported earlier. The two 'new' people seen on November 4 were not seen this night. There were two reports, unconfirmed, first, that three people were sleeping in the UNB wood lot and did not wish to come into town, and second, that a man was seen attempting to gain admission to the 'detox' late at night.

Time 3: November 26, 1999 November 28, 1999

	Men	Women		Men	Women
Confirmed	2	-	Confirmed	2	-
Reported	-	-	Reported	-	-

On November 26 one person was located 'on the street' who was also located on each of the previous street searches. This person struggles with severe mental health issues. A second 'new' person was accommodated in the jail.
On November 28 two men were located and both have been counted on previous street searches.

Summary:

During the six street searches most of the individuals who were found on different nights had a place to stay if they had been in a condition (i.e., sober) to use it. One person had severe mental health problems but he also had a place to stay. Of the 'confirmed' people, several were seen repeatedly. In terms of 'new' people, people not known to local agencies, 5 were men, one was definitely passing through Fredericton, another slept overnight in the jail. Little is known of the one woman who was put-up overnight by AHESS. However, these 6 'new' people did not reappear on subsequent searches.

CHAPTER 4 - VIEWS FROM THE INSIDE

INTRODUCTION

This section of Chapter 3 provides descriptive information about the homeless people who were interviewed. In total 57 usable interviews were obtained. The main criterion was that a person be homeless - 'a person who has no long term residence or whose accommodation is normally short term (such as the Shelter or friends), and who has moved within the past six months.' One of the realities here is that several of the long-term residents of the Shelter consider the Shelter to be 'home' and would not be considered homeless if they were staying in another residence. Almost all of the people interviewed used the services provided by either the Emergency Shelter or the Community Kitchen. While some of the respondents were mothers and fathers, at the time of the study, all of the respondents were, in effect, single individuals. NOTE: Some statistics may total less than 57 as it was not possible to gather information on every question from every respondent.

DEMOGRAPHIC INFORMATION

TABLE 2: Gender:

Male:	42 (74%)
Female:	15

TABLE 3: Age:

	23 or less	26 - 34	35 - 44	45 - 54	55 - 64	65 +
Male	10	7	12	10	-	3
Female	9	-	1	5	-	-

TABLE 4: Education Attained:

Gr. 8 or less Months	Some H.S.	Some Post-Sec.	H.S. or G.E.D.	H.S., some post -sec.	Post Sec.	?
7	23	7	5	6	6	1

TABLE 5: Source of Income:

Welfare	Disability	In Process	Other
17	17	9	14

TABLE 6: Amount of Income Reported:

In Process	$300 or Less	$301-500	$501+	?	None
9	11	11	11	9	6

Tables 2-6 indicate that the majority of the homeless people interviewed were male (74%), of various ages, and did not complete High School (37 or 65%). While some of the respondents reported that they were in 'job training' in the current economic climate the large majority of the respondents are in a very poor competitive position regarding employment.

A subsequent analysis of Table 3, revealed that of the 19 people who were 23 years or younger, 9 had lived in Fredericton less than 4 months, and 9 had lived in Fredericton over 5 years.

From Table 5, 4 of the 17 respondents who indicated their source of income was due to disability, indicated their financial support came through Canada Pension. Table 5 indicates that the majority (39 of 57) of the respondents, about 68%, are clients, or applying to be, of HRD-NB. Of the 14 respondents under 'other,' 5 had no income and had not planned to contact HRD-NB, 1 was applying for EI, 2 received income from Native Bands, 3 had employment (part-time, odd jobs), 2 received pension income, 1 depended on family and odd jobs.

In Table 6, the majority of the respondents were either in receipt of income assistance or had made contact with HRD-NB and were in the process of applying for income assistance.

While the amount of income for some of the respondents is not known (for example, those 'in process'), it is known that the amount of income for those who apply to HRD-NB for assistance will be limited. However, the majority of those receiving financial assistance from HRD-NB received more than the basic rate ($267). Virtually all respondents exist on an income far below the $14,000 annual income which Statistics Canada says is required by a single person in small city (30,000 - 100,000) to stay above the poverty line.

EXPERIENCE OF HOMELESSNESS:

TABLE 7: Length of Time Homeless

Less than 3 Months	3 - 12 Months	13 Months - 3 years	37 Months - 5 Years	61 Months or more	?
7	8	12	10	18	2

TABLE 8: Number of Moves in Past Twelve Months (Approximate)

0 - 1	2 - 4	5 - 12	13+	Too Many	?
5	15	26	4	3	4

TABLE 9: Ever lived at the Fredericton Emergency Shelter

YES - 49
NO - 8

TABLE 10: Frequency of use of the Fredericton Emergency Shelter (n=49)

ONCE	IRREGULAR	REGULAR	RESIDENT
12	20	14	3

Note: Once: One time use for any number of nights
Irregular: Person who has used the Shelter "once in a while."
Regular: Person who uses the Shelter on a recurrent basis.
Resident: Person who has lived at the Shelter longer than 4 Months.

TABLE 11: Current Accommodation

NONE	SHELTER	ROOM / APT	OTHER
3	38	10	6

Note: The interviews took place over a period of several weeks, and respondents were asked where they were staying that night.

Tables 7 - 11 presents a summary of the respondents experience of homelessness. While people have been homeless for varying lengths of time, the majority of respondents have moved several times over the past twelve months. Many respondents moved so frequently they could not remember the exact number, "at least 6 times," "too many" and " more than 5" were examples. 49 of the 57 respondents stated that they had stayed at the Shelter, and of these over 70% (37/49) had stayed at the Shelter more than once. For many of the respondents, even those who stayed at the shelter only 'once in a while,' the Shelter has become a routine, if not significant, part of their life.

HOME COMMUNITY:

TABLE 12: Respondents who considered Fredericton Home

Fredericton is Home:	18
Elsewhere:	39

TABLE 13: Length of Time in Fredericton:

Less Than 1 Month	1 - 4 Months	4 -12 Months	1- 5 Years	61 Months or more
16	8	3	6	24

Tables 12 and 13 indicate that the majority of respondents are not 'from Fredericton' as clearly 39/57 or 68% report that Fredericton is not 'home,' and 33/57 or 58% report that they have lived in Fredericton less than 5 years. This information plus the large number of respondents who have lived in Fredericton less than 1 month (16) and who have lived in Fredericton less than 1 year (27), suggests that many homeless people in Fredericton are, or have been, transient. A subsequent analysis of this table revealed that 9 of the 27 people in Fredericton less than one year were 23 years of age or younger.

BACKGROUND CHARACTERISTICS OF HOMELESS PEOPLE

TABLE 14: Experience with the law

	NONE	MINOR	SERIOUS	NO ANSWER
Overall	14	16	25	2
Male	7	13	21	1
Female	7	3	4	1

Note: Minor offense included drinking in public, drunk and disorderly, drinking under age, and "nothing serious"
Serious offense included fraud, grand theft, assault, or required probation or serving time in jail.

TABLE 15: Experience with violence

43/57 (75%) of the respondents reported experiences with violence.

	IN CHILDHOOD	AS AN ADULT
Overall	36	27
Male	29	14
Female	7	13

Violence was self-defined by the respondent but responses included being physically or sexually abused, assaulted, and beaten up. 69% of men (29/42) and 47% (7/15) of women experienced abuse as a child, and 33% of men (14/42) and 86% of women (13/15) experienced violence as an adult. Table 15 indicates that while men were more likely to have experienced abuse as a child (69% to 47%), women were far more likely than men (86% - 33%) to have experienced abuse as an adult.

TABLE 16: Experience with mental health problems

	YES	LIKELY	NOT LIKELY	?
Overall	18	4	33	2
Male	12	3	26	1
Female	6	1	7	1

Overall, 23/57 or 40% of respondents experienced, or were likely to have experienced, mental health problems. This is similar to proportion reported in other centres. Women (50% or 7/14) were more likely than men (36% or 15/42) to disclose a mental health problem.

TABLE 17: Experience with addictions

	NO	GAMBLING	DRUGS	ALCOHOL	?
Overall	18	3	20	31	1
Male	12	3	15	25	-
Female	6	-	5	6	1

66% of the respondents experienced problems with addictions, many with more than one. Men (71% or 30/42) were more likely than women (64% or 9/14) to disclose their experience with an addictions.

A further analysis of the data which formed Tables 16 and 17 indicates that only 3 women (21%) and only 6 men (14%) reported neither an addictions or mental health problem.

Tables 14 - 17 reveal some characteristics of the homeless people who were interviewed. The majority 72% (41/57) had experienced 'run ins' with legal authorities, 44% (25/57) for what can be considered more serious offenses. 75% (43/57) of respondents had been victim of violence either as a child or as a adult, with 63% (36/57) reporting that they experienced violence as a child.

It is not possible to say what role these factors have played in the respondents becoming homeless, however the stress of homelessness, through the loss of supports, loss of income, loss of housing, etc., can easily be understood to exacerbate any predispositions which may have existed prior to a person becoming homeless.

FACTORS CONTRIBUTING TO HOMELESSNESS

TABLE 18: Why are you homeless?

	MEN	WOMEN
Severe Family Stress	9	1
Misfortune*	10	1
No Stable Employment	4	
No Money	5	2
Evicted	3	
Left Abusive Situation	1	6
Addictions	24	2
Choice**	2	2
Teenage Pregnancy		1
Marriage Separation	10	3
Criminal Record	6	
No Comment	2	3

*Misfortune includes health problems, death of a spouse, loss of job and growing up poor.

**Choice included leaving foster care, not wanting to follow rules, and not wanting to stay in a special care home.

It is commonly understood, and most respondents indicated, that more than one factor contributes to homelessness. In this study, for example, 67% (38/ 57) of the respondents indicated more than a single factor contributed to their being homeless. Among the men, 24 or 57% reported that addiction was identified along with severe family stress (in family of origin), misfortune (health problems), lack of stable employment, evictions, marriage separation and criminal convictions. Many of these problems are mutually reinforcing, however addictions are the most frequently reported single 'cause' of homelessness among the men who responded.

A substantial difference is found between the men and the women as addictions was an issue for only 2 women (13%). As well, in part due to the smaller number of female respondents, no similarly strong combinations were reported by the women who responded. However, for 6 women (40%) leaving an abusive situation (3 from family of origin, 3 from partner/spouse) was a reported as a factor in their homelessness, compared to only 1 man (2%). It is by far the most frequently reported factor contributing to homelessness among women.

In terms of misfortune, health problems were reported by 6 men and 1 woman. Lack of employment was cited by only 4 men.

While Table 18 is informative regarding the many factors that people reported to have contributed to them being homeless, two points are noteworthy. First, neither men nor women self-reported mental health problems as contributing to being homeless. Second, if we group all the factors related directly to income and housing (i.e., no stable employment, no money and evicted), only 14 of 89 responses (16%) are found. While there may be a degree of 'under-reporting' here as other categories such as severe family stress may result from loss of employment, the data indicates that for this group of people, being homeless is attributed to factors other than lack of income and housing. As well, the very low number directly referring to lack of stable employment (4/89) as a cause of homelessness suggests that the majority of respondents were not actively in the work force. This information needs to be considered in terms of any conclusions as this data suggests that resources might be directed at resolving other problems rather than focusing exclusively at income and housing.

SUGGESTIONS FROM HOMELESS PEOPLE

Respondents were asked what do you need to make your life better. Overall, while income is clearly related to several of the factors which would help 'make your life better,' many of the homeless people interviewed identified resources and services which would give them a way-up; they are not looking for handouts. Some identified treatment priorities, others, in various ways, referred to their difficulty trying to get ahead when they have so few resources available. The responses were grouped into categories based on their similarity.

TABLE 19: What do you need to make your life better?

	MEN	WOMEN
Accommodation		
Low cost housing	- 7	4
More Shelter Beds	- 9	
Need un-restricted residence	- 7	2
Separate Accommodation for Women	- 4	3
Half-way, second stage housing	- 2	
More Beds at the detox	- 2	
Group Homes for Youth	- 2	
Financial Assistance		
More Financial Assistance	- 18	4
Abolish Economic Unit Policy	- 2	3
Help people get back on their feet	- 2	1
Health Care Card	- 1	2
Employment		
Jobs	- 9	5
Training, Education	- 5	3

Services

Better access to services	- 5	4
Need Services during the day	- 9	1
Need Outreach Worker	- 7	
Closer long-term addictions program	- 6	
Health Care	- 1	

Other Services

	Men	Women
Change Community's attitude	- 4	3
Additional services	- 5	
One Main Database	- 2	
Increase communication among service providers	- 1	
No comment	- 2	3

Financial Assistance

While only 22 (47%) of the respondents made direct reference to the need for more financial assistance, considering the low rate of financial assistance available ($267 per month as the base rate for single people), one might have anticipated a larger response as more money would provide immediate benefits. However, many other respondents identified needs related to income - housing, accommodation, employment, and education. The need for more income is clearly a top priority. Comments included:

"I spend the day just trying to find food, shelter, clothing, etc."
"System creates sense of hopelessness, lose any sense of self-esteem you had."
"Special care homes take almost all your disability amount."
"All comes back to only $264, rent in Ontario is about the same as here yet assistance is $520 a month. Didn't need to steal to get by."
"Rooming houses want rent money before they give you a confirmation note, but welfare won't give you assistance without confirmation note."
"Current amount forces people to lie, cheat, steal."
"Amount guides each and everyone right into the shelter."
"$264 is a joke ... it drives a person to steal."

5 respondents suggested that eliminating the 'economic unit' policy would allow

recipients of income assistance to live together and, as a result, save a considerable proportion of their income which goes toward rent. Comments by the respondents included:

"I had to leave a shared apartment to get assistance"

"(they) threatened to cut me off before age 19 because I didn't have a guardian, now will cut me off if I stay with anyone."

3 respondents suggested that additional income, for a temporary period, would be beneficial in helping people to become re-established. Comments included:

"Give us 3-6 months at $1,000 a month to help us get back on our feet, that way we don't lose everything we own."

3 respondents mentioned the importance of having the health care card and identified it as a resource which helps them to get ahead. In one interview a women reported her struggle of having her major prescribed medication paid for but the 'over the counter' medication which was needed to counteract the side-effects was not covered, and she could not pay for them. Comments included:

"I make $531 a month. Turned down for health care card, end up going to the hospital, costs the government more in the long run;"

"Give health care card for people under certain conditions - give more incentive to get off the system,"

"not enough drugs are covered. Lose card when you try to get ahead."

Employment

14 people (9 men and 5 women) identified their need for employment. One man said that "I am willing to work but no one will hire me" another reported his criminal record as a major deterrent in his finding a job. Several said they were willing to work and suggested options which might enable them to work. Comments included:

"City could hire us to clean up city one or two days a week for extra money, many (employers) won't hire you if you are on assistance."

"More long term jobs with benefits/security and training programs, nothing is offered to middle aged group."

"Job sharing would open up more jobs for people."

8 respondents cited the need for training or education programs to help people secure employment. Comments included the need for job training and affordable educational opportunities. One respondent suggested that they be paid to take training courses.

Accommodation

Several respondents referred, in different ways, to the need for housing. While the

personal realities of their lives likely influenced their particular recommendation, the need is definitely a high priority. 30 (53%) respondents identified an issue related to accommodation. The need for low cost housing was identified by 11 respondents (19%). Comments included:

"I've been on the waiting list for senior complex for many months."

"Have been on long term housing list since 1993, never got called."

9 respondents noted the need for increased ability of the Emergency Shelter to accommodate more people. Some identified the need to eliminate the waiting list for a bed at the Emergency Shelter. Other comments included:

"more shelter beds,"

"larger shelter,"

"put in bunk beds"

"we need a more adequate facility, should not be turned away because no room."

The need for a 'unrestricted' residence referred to the need for those who are struggling with alcohol to have a place so they do not freeze to death. 9 respondents referred to this need. Comments included:

"Woke up one night with face in snow/water."

Need a shelter "one for booze, one for drugs."

"Should be government funded."

"Supervised."

7 male and female respondents recommended, in various ways, the need for "more beds for women." While some referred simply to the need for more beds, others cited the need for separate accommodation for men and women. Comments included:

"Make shelter into dorms."

"Women and youths shouldn't be at shelter, need separate ones for them - too dangerous."

"Shelter is an incubation centre, end up drinking, doing drugs, selling body for money."

"Need shelter for women separate from men."

The need for a half-way house or second-stage housing, more beds at the detox and group homes for youth, were recommended by two respondents each.

Services

Of the 12 respondents who recommended services during the day, 6 identified programs or activities which created opportunities for recreation or personal development - put another way, it gave people something constructive to do during the day. Comments included:

"Recreational services, just a place to socialize."

"Need something to do, boredom causes many to turn to drugs, alcohol."

"Give place to show creativity, help to boost self-esteem and lessen chance of using drugs and alcohol."

Closely related to these suggestions from 6 respondents regarding the need for more comprehensive services. Several service providers raised the importance of early intervention when children are young in an effort to reduce more serious problems arising later. Comments included:

"Community centre to help both kids and adults."
"Day care for struggling families."
"More programs for adults."
"Services for disabled people."

Better access to services did not include waiting lists for shelter or housing, but the 10 respondents noted a variety of access problems including waiting for services from 'the mental health' and 'the detox,' difficulty accessing mental health services, and the service gap for 16-19 year olds. Comments included:

"If you don't go to foster care, you don't get assistance."
"Need transportation to programs."
"Clothing banks charge too much."
"Shelter is supposed to be for emergencies but there is nowhere to go from here."

While expressed in various ways, the need for an outreach worker was recommended by 7 respondents. Comments included:

"Shelter should have a counselor on hand."
"More social workers to help those with mental health problems."

6 respondents noted the need for a "long term addictions program being closer to town." One of these people commented:

"We need recovery home here, leave detox go right back into same system you just left."

Other Services:

Changing community attitudes was reported by 7 respondents. This reflects the 'stigma' which many homeless people may feel. Comments included:

"Stop pretending homelessness doesn't exist."
"(I've been) referred to as 'lower than scum' and treated 'like shit' by employers but if we quit we lose assistance."
"Want to be treated with respect, system destroys your dignity ... nothing left."

Additional services incorporates many individual suggestions including:

"Newer mattresses at shelter and group meetings."
"Shelter does not always have basic supplies like toothpaste, deodorant, ..."
"If you work 8-5 or 9-5, hard to get a shower at shelter."

"Attention to spirituality."

The recommendation of one main database is best explained in this comment:
"Shouldn't have to cancel/restart assistance if moving from one city/province to another."

CHAPTER 5: Discussion

OVERVIEW

One of the challenges when information is gathered from a variety of sources is to pool the information gathered in an effort to arrive at a more cogent and holistic understanding of the issues. This challenge has been encountered in this study as the information gathered from professional service providers, homeless people and the reviews and recommendations from the different cities and municipalities, looks at homelessness from different perspectives. While homelessness is clearly connected to poverty, homelessness is a complex phenomenon and as such, it does not lend itself to a single cause and cannot be addressed effectively by any single program or service. While the information gathered in this study can be used to inform service provision in many areas, the focus of this final chapter will be on the 'shelter needs' of homeless people in Fredericton.

A review of the reports from other cities and municipalities, and the findings from the interviews of service providers and homeless people, leads to the conclusion that the causes of homelessness in many cities in Canada are similar to those reported in Fredericton. For example, the summary of four major causes of homelessness reported by the *Taking Responsibility for Homelessness Report* (1999) - increased poverty, lack of affordable housing, deinstitutionalization and lack of discharge planning, and social factors - are mirrored in the responses of the service providers and of homeless people in Fredericton. The need for increased financial assistance, the lack of adequate shelter and low-cost housing, the high incidence of mental health problems and alcoholism, and the escape from abusive relationships are among the most frequently reported problems and needs. While homelessness manifests itself as a lack of adequate shelter, it is so much more, it is a condition of being the 'outcast' of mainstream society.

While large cities such as Toronto and Calgary report homeless families, this was not the case in Fredericton as virtually all homeless people encountered did not have homeless children in their care. The few women with children who were reported by respondents in this study were 'put-up' by AHESS and followed-up by HRD-NB. However, many of the realities of homelessness experienced by people in Fredericton reflected national trends. For example, the prevalence of mental health problems among the homeless women (50%) and homeless men (36%) who were interviewed, mirror national statistics. As well, the observations of many service providers that the "face of poverty is getting younger", also reflects national trends. The core realities of homelessness are widespread and Fredericton, just like almost every city in Canada, is dealing with homeless people.

Many cities, including the three major cities in New Brunswick, appear to have some similar services, such as food banks, clothing banks, shelters and transition houses. However,

different communities have their own array of services and their own particular service concerns. For example, Moncton has a shelter for both men and women but they provide only short-term accommodation. People without accommodation are encouraged and/or assisted in their efforts to locate a longer term residence, most often in 'private sector housing'. In Saint John there is a long-established shelter for men but no emergency shelter for women. Homeless women are accommodated at the 'Y' if they are referred by an agency, or the jail. One of the major concerns in Saint John, with one of the highest poverty rates in Canada, is a home for young unwed mothers. As well, in Saint John there are several older buildings which provide low rental accommodation, while in Fredericton gentrification appears to have reduced the availability of low-rental accommodation.

Review of Findings for Fredericton

It is important that a study such as this one recognizes the efforts of people in the Fredericton community, and the unique approach that has developed in this city to address homelessness. A feature unique to Fredericton is the close proximity of the Community Kitchen, Emergency Shelter, Mental Health Clinic and Addictions Services, among others. This provides increased opportunities for agencies to cooperate in service provision and it allows homeless persons to more easily form a network of contacts and friends. Another evident strength is the sense of care and compassion which is expressed by so many of the service providers. This compassion has contributed to many homeless people experiencing a sense of acceptance and belonging which may be a significant factor, for many, in promoting their ability to remain in the community. For many homeless people what has resulted from these two factors is the creation of a support network which, while encouraging a certain sense of well-being, may also stand in the way of homeless people being ready and willing to move on to, what some may consider as, 'more appropriate' housing.

While a unique service system has developed, the people interviewed, considered together, present a picture of the reality and experience of homelessness in Fredericton during the months of this study. For example:

- In the six street searches conducted, almost all of those found 'on the street' had shelter available to them should they be in a condition to make use it. The searches located only 4 individuals (and these were seen only once) who were without shelter.
- The Emergency Shelter has had an average 'bed-occupancy' of 88% (30/34) for the last few months of 1999, and during this period was at capacity (or more) about 23% of the time. The Shelter serves an average of 34 new people every month.
- The Police Department 'put-up' in the jail, an average of 9 men and 1 woman each month in 1999.
- In an average month in 1999, Transition House turned away 9 women who requested shelter.

While the focus of this study is on shelter, some services such as those providing food and clothing, impacts shelter by allowing people to devote more income toward housing needs. The situation in Fredericton becomes clearer if information about some of the homeless people is considered. For example,

- 15 of 57 (26%) respondents have been homeless less than one year.
- 39 of 57 (68%) respondents report that Fredericton is not their home.
- 33 of 53 (62%) respondents moved 5-times or more in the past year.
- 27 of 57 (47%) respondents have lived in Fredericton less than one year.

- 67% did not complete high school.
- At least 75% of the respondents are clients of HRD-NB or Canada Pension.
- 63% experienced violence in their childhood.
- 72% experienced 'run-ins' with the law.

- 4 people (7%) directly reported that lack of employment was a cause of their homelessness.
- 7 of 52 (13%) respondents reported that health problems contributed to their homelessness.
- Of the 57 respondents (42 men and 15 women), 36 men (86%) and 12 women (79%) reported having experienced problem with either addictions or mental health.
  10 of the 15 longer-term 'guests' at the Shelter were known to the local mental health clinic.

- There were some substantial differences reported between men and women on what contributed to homelessness.
  - For men, addictions was reported as a factor by 57%, and only 13% of the women.
  - For women, 40% reported that they left an abusive situation compared to only 2% of the men.
  - 87% of women had experienced violence as an adult.
  - 4 of 5 women who have been homeless more than 5 years, reported mental health concerns.

The understanding of homelessness in Fredericton is further clarified when the problems and recommendations of the service providers and the homeless people interviewed are added to the above information. The more frequently reported issues are:

- Need for low cost, affordable housing. This came forward in discussions of many problems and many recommendations including:

  - A shelter for women.
  - Supportive housing.

- Transitional housing.

- The need for more financial assistance: This came forward in a variety of issues, including:
  - The need for money for rent
  - The abolition of the economic unit policy
  - Greater flexibility in the use of medical cards
  - Increased transition financing and support when a person is moving back into the community from a treatment or training program

- Service gap for 16-19 year olds. This was raised by many in terms of access to services (below) but also in terms of:
  - Youth outreach
  - Activities and training during the day
  - Investing now to save money in the future

- Access to Services: Difficulty gaining access to services did not just apply to housing, but also to:
  - Waiting lists for counselling services
  - Lack of information about services available (especially for youth)
  - Distance of treatment centres from Fredericton
  - Lack of preparedness for employment
  - Desire for more coordination and communication among agencies
  - The need to re-apply for assistance following a move.

CONCLUSIONS:

Conclusions reached regarding what can be considered as important realities of homelessness in Fredericton include:

1. The study was not able to identify a population lacking shelter.

2. As in other cities in Canada, there is the need in Fredericton for affordable and adequate accommodation for people on very low income. The study revealed evidence of 'relative homelessness' - people lack access to affordable and decent housing.

3. On an average day during the period of this study, 50% of guests staying at the Emergency Shelter have needs of a long-term nature often requiring long-term housing and support services, rather than short-term, emergency assistance.

4. The major factors contributing to homelessness, among the homeless people interviewed, included addiction and mental health problems as serious concerns. While homelessness

certainly can be understood to exacerbate such problems, effective services for homeless people should incorporate comprehensive addiction, mental health and counselling programs. In regards to the presence of addiction and mental health concerns, the 'picture' of homelessness obtained in this study is consistent with the findings of studies of homelessness in other Canadian cities.

5. There is a need for coordination and cooperation in service delivery, including housing, as the majority of homeless people experience multiple problems. Many problems are of a long-term nature, and agencies providing emergency services for the homeless have attempted to 'fill the gap' created by the lack of services. These efforts, however, have seriously stretched the resources available for 'emergency' services; for example, the Emergency Shelter operates at or near capacity on most nights.

6. There is a transient population in Fredericton, just as there is in many other cities. This draws attention to the need for local solutions which have a broader, provincial scope.

7. The provision of adequate housing can be seen as an important support both in regards to intervention programs for people with serious or long term concerns, and in the transition from various treatment and training programs.

Potential Actions re: Shelter:

The following actions are predicated on the assumption that the province and federal government will not soon commit substantial funds toward low-income, single occupancy, accommodation, nor to substantial increases in income assistance. Both of these would dramatically reduce the number of homeless people. While some funds are said to be forthcoming from the federal government for housing, it is uncertain at this time how they will be allocated. However, there some actions which fall within the mandate of the Provincial Government and would directly provide increased opportunities for homeless people to acquire adequate housing in Fredericton. Some of these actions would also likely result in some degree of reduced demand at the Shelter.

1. Abolish the economic unit policy.
2. Establish a data base or ID card format which recognizes the transient nature of the lives of many homeless people.
3. More flexible use of the 'medical card'
4. Housing supplement added to income assistance.

Some actions require the cooperation and coordination of service providers, and also of local and provincial organizations (including government). Action on either or both of the next two possible actions would substantially increase the number of emergency beds available.

5. Provide supportive (semi-structured) housing. Like many shelters in Canada, many of the beds at the Emergency Shelter are used as long-term housing for people with special needs. There is clearly a need for supportive housing which provides some degree of security and support but allows valued freedom. Such an initiative may benefit from being carried out in cooperation with the Emergency Shelter as many of its 'long term guests' feel comfortable at the Shelter but are also likely eligible for a lightly supervised residence (perhaps operating in a manner similar to Shelter).

6. If a supportive residence can be established the number of women staying at the shelter would be reduced. While there is significant support for a shelter for women from the professional service providers (75%), it may be difficult to argue for a separate shelter solely on the basis of the number of women (an average of five new women each month) accommodated at the Emergency Shelter. Saint John was unable to sustain a separate shelter for women as there were too few women who used it.

   On the other hand, a separate shelter can be argued for on the basis of the need for greater safety and security for women, the social standards in our community, and the desire to separate men and women who are strangers. Some of whom fear living at the shelter or require a respite from stressful relationships with men.

   Different options exist including dividing the existing shelter, having the empty beds in other facilities for women in Fredericton available for emergency accommodation, establishing a small facility, perhaps a four bedroom townhouse, operated in conjunction with NB Housing and other service agencies, and a multi-stage, multi-purpose facility for women.

7. Explore the feasibility of a existing services providing a supervised but open-access facility so that, for example, the small number of people with severe addictions can consistently find refuge from the elements.

8. Transitional housing and support when people return to the community from treatment or training programs. Included here would be an increased level of financial assistance for several months, along with appropriate housing and support when a person returns to the community.

9. There is a need for more effective dissemination of information about what resources exist and how they can be effectively accessed. While this is a 'catch-22' situation as agencies have heavy workloads already, sound advice may reduce the hardship experienced by homeless people new to Fredericton, and may increase the effectiveness of service delivery.

There are other potential actions which do not relate directly to housing (such as the need for mental health, addictions and outreach workers, and day-time recreational and educational endeavors), but the potential actions listed are limited to those which would have a more direct impact on shelter needs. It is important to realize that, whatever action is taken in Fredericton, homelessness is a complex reality and effective interventions will require action on several fronts by different organizations with the strong support and cooperation of all levels of government. It is strongly suggested that local coordination and cooperation among the different agencies and government services would lead to more effective programs and services.

RESOURCES

Adshade, L. Homeless Youth: Fredericton's Hidden Problem. unpublished monograph, St. Thomas University, April 1994.

Begin, P., Homelessness in Canada. Current Issue Review, Political and Social Affairs Division, Library of Parliament, May 1990.

Blau, J., The Visible Poor: Homelessness in the United States. Oxford University Press. 1992.

Fallis, G. & Murray, A., Housing and the Homeless Poor: New Partnerships among the Private, Public and Third Sectors. University of Toronto Press, 1990.

Federation of Canadian Municipalities, National Housing Policy Options Paper: A Call For Action. June 1999.

Golden, A., et.al., Taking Responsibility for Homelessness: An Action Plan for Toronto, Report of the Mayor's Homelessness Action Task Force. January 1999.

Guest, D., The Emergence of Social Security in Canada. The University of British Columbia Press, 1991.

Lee, B.A., Lewis, D.W., and Jones, S.H., Are the Homeless to Blame? A Test of Two Theories. in The Sociological Quarterly, Vol. 33, 4, pp535-552, 1992.

Lee, B., Lewis, D., and Jones, S., Public Beliefs About the Causes of Homelessness in Social Forces, 69(1): 253-265, 1990.

Lightman, E., Discharge Planning and Community Housing in Ontario. Social Work in Health Care Vol. 25, No.3, 1997.

McLaughlin, M., Homelessness in Small Town and Rural Canada, Perception 12(1) Winter 1988.

McLaughlin, M., When the Roof Fell In Perception 14(2) Spring 1990.

Minister's Task Force on Housing, Home Sweet Home. New Brunswick, 1988.

National Council of Welfare, Welfare Incomes 1994. Minister of Supply and Services, Fall 1995.

National Council of Welfare, Poverty Profile 1997. Minister of Public Works and Government

New Brunswick Family Policy Secretariat, Foundations for the Future: A Proposed Framework for Family Policy in New Brunswick. August 1995.

Peressini, et.al., Estimating Homelessness: Towards a Methodology for Counting the Homeless in Canada. CMHC 1996.

Region of Ottawa Carleton, Creating Community Solutions: An Action Plan to Prevent and End Homelessness in Ottawa Carleton. June 1999.

Ross, D., Shillington, R., Lochhead, C., The Canadian Fact Book on Poverty. Canadian Council on Social Development, 1994.

Taylor, J. & Zwozdesky,G., Homelessness in Edmonton: A Call to Action. May 1999.

United Nations, The International Bill of Human Rights. Human Rights Program, Dept. of the Secretary of State & Minister of Supply and Services, 1983.